### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level	
0568	4	Lennep Elem		30	EL	
Proposed Restricted Indirect Cost Rate% (Ro			ound to nearest hundredth (X.XX%) of a percent.)			
INSTRUCTIONS: Complete and submit with one copy of each application for Indirect Cost Rate. A separate application should be submitted for the elementary and high school district. A copy of this certification will be returned upon approval of your rate.						
This is to certify that I have reviewed the indirect cost rate proposal submitted herewith and to the best of my knowledge and belief:						
(1) All costs included in this proposal to establish the final indirect cost rate for the periods indicated above are allowable in accordance with the requirements of the Federal award(s) to which they apply and OMB Circular A-87, "Cost Principles for State and Local Governments." Unallowable costs have been adjusted in allocating costs as indicated in the attached Predetermined Indirect Cost Allocation - Schedule A.						
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.						
I declare that the foregoing is true and correct.						
Signature of District Superintendent or Board Chairperson			Street Address or P.O. Box			
			Lennep Route  City  Zip Code			
Printed Name of Authorized Official			City	ZIÇ	Code	
			Martinsdale	590	053	
Title			Date			
Send completed form to: School Accounting and Budgeting Office of Public Instruction PO Box 202501 Helena, MT 59620-2501						
ACCEPTED AND APPROVED FOR THE SUPERINTENDENT OF PUBLIC INSTRUCTION BY:						
Approved Rate for FY2004		Date Approved				
			Signature			

### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level	
0569	8	White Sulphur Spgs	Elem	30	EL	
Proposed Restricte	d Indirect Cost Rate _	ound to nearest hundr	edth (X.XX%) of	a percent.)		
	implete and submit with submitted for the elem al of your rate.					
This is to certify that I knowledge and belief:	have reviewed the ind	irect cost rate proposa	al submitted herewit	th and to the be	est of my	
allowable in accordan A-87, "Cost Principles	in this proposal to estance with the requirements for State and Local General heattached Predeterm	nts of the Federal awa overnments." Unallov	rd(s) to which they wable costs have be	apply and OME en adjusted in	3 Circular	
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.						
	going is true and corre					
Signature of District	Superintendent or B	oard Chairperson	Street Address o	r P.O. Box		
			PO Box C			
Printed Name of Authorized Official			City	Zip	Code	
			Wht Slphr Sprgs	596	645	
Title			Date			
Send comp	leted form to:					
	School Accounting ar Office of Public Instru PO Box 202501 Helena, MT 59620-2	ction				
ACCEPTED A	ND APPROVED FOR	THE SUPERINTEND	ENT OF PUBLIC II	NSTRUCTION	BY:	
Ар	proved Rate for FY20	04	Date Approved			
			Signature			

### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level	
0570	8	White Sulphur Spgs	30	HS		
Proposed Restricte	roposed Restricted Indirect Cost Rate			edth (X.XX%) of	a percent.)	
application should be	submitted for the elem					
This is to certify that I have reviewed the indirect cost rate proposal submitted herewith and to the best of my knowledge and belief:						
allowable in accordan A-87, "Cost Principles	ice with the requiremer s for State and Local G	nts of the Federal awa overnments." Unallov	rd(s) to which they vable costs have be	apply and OME en adjusted in	3 Circular	
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.						
Signature of District Superintendent or Board Chairperson			Street Address or P.O. Box			
			PO Box C	<b>,</b>		
Printed Name of Aut	thorized Official		City	Zip	Code	
			Wht Slphr Sprgs	596	645	
Title			Date			
Send comp	leted form to: School Accounting ar Office of Public Instru PO Box 202501 Helena, MT 59620-2	ction				
ACCEPTED A	AND APPROVED FOR	THE SUPERINTEND	ENT OF PUBLIC II	NSTRUCTION	BY:	
Approved Rate for FY2004			Date Approved			
			Signature			

### **CERTIFICATION FOR INDIRECT COST RATE**

For FY 2003-2004

Legal Entity #	School Dist. #	School Name		County	Level	
0574	34	Ringling Elem		30	EL	
Proposed Restricted Indirect Cost Rate% (Round to nearest hundredth (X.XX%) of a percent						
INSTRUCTIONS: Complete and submit with one copy of each application for Indirect Cost Rate. A separate application should be submitted for the elementary and high school district. A copy of this certification will be returned upon approval of your rate.						
This is to certify that I have reviewed the indirect cost rate proposal submitted herewith and to the best of my knowledge and belief:						
(1) All costs included in this proposal to establish the final indirect cost rate for the periods indicated above are allowable in accordance with the requirements of the Federal award(s) to which they apply and OMB Circular A-87, "Cost Principles for State and Local Governments." Unallowable costs have been adjusted in allocating costs as indicated in the attached Predetermined Indirect Cost Allocation - Schedule A.						
(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.						
I declare that the foregoing is true and correct.  Signature of District Superintendent or Board Chairperson   Street Address or P.O. Box						
Signature of District Superintendent or Board Chairperson						
Printed Name of Authorized Official			PO Box 157 City Zip Code			
Timod Ramo of Ad	monzoa omolai			-		
<b>-</b>			Ringling	596	642	
Title			Date			
Send completed form to: School Accounting and Budgeting Office of Public Instruction PO Box 202501 Helena, MT 59620-2501						
ACCEPTED AND APPROVED FOR THE SUPERINTENDENT OF PUBLIC INSTRUCTION BY:						
Approved Rate for FY2004			Date Approved			
			Signature			